



Lincoln Police Department  
Thomas K. Casady, Chief of Police  
575 South 10th Street  
Lincoln, Nebraska 68508

402-441-7204  
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

August 10, 2004

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Gateau Enterprises LLC., d.b.a. Gateau Café & Patisserie, 330 South 10<sup>th</sup> Street requesting a class J liquor license.

Gateau Enterprises has requested that Eric Lemke be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Eric Lemke was born in St Cloud, Minnesota. He attended the University of Nebraska graduating in 1991.

Eric Lemke employment history is as follows:

2001 – Present	Owner, Green Gateau	Lincoln, NE.
1997 – 2000	Chef, Cornhusker Hotel	Lincoln, NE.
1993 - 1997	Chef, Vincenzo's	Lincoln, NE

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) GREEN GATEAU

Manager Owner Other \_\_\_\_\_

Name: ERIC LENKE

US Citizen ? Yes No

Has applicant ever been cited for liquor law violations ? No Yes  
Explain \_\_\_\_\_

Does applicant have an interest in another liquor license ? No Yes  
Explain \_\_\_\_\_

Is spouse qualified to hold a license ? Yes No N/A

How is applicant if not an owner to be paid ? Salary Hourly ✓

How many hours will applicant be at the establishment ? 45+

Any other employment ? No Yes, explain \_\_\_\_\_

Any previous experience with a liquor license? Yes No

Any criminal convictions ? No Yes  
Comments \_\_\_\_\_

Is applicant a property owner in Lincoln ? Yes No

Is applicant involved in any civil litigation ? No Yes  
Comments \_\_\_\_\_

NONE  
MACHINE  
BROKE

(+) Photo (+) Records Check (+) References

Comments \_\_\_\_\_

Interview Date 8 / 10 / 04



# STATE OF NEBRASKA



Mike Johanns  
Governor July 29, 2004

City Clerk  
County/City Bldg  
555 South 10<sup>th</sup> Street  
Lincoln NE 68508

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALE; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

*Michelle Porter*  
Michelle Porter  
Licensing Division

Enclosures

Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12/99

set date 8/9  
PH: 8/23/04  
NEBRASKA LIQUOR CONTROL COMMISSION  
Hobert B. Rupe  
Executive Director  
301 Centennial Mall South, 5th Floor  
P.O. Box 95046  
Lincoln, Nebraska 68509-5046  
Phone (402) 471-2571  
Fax (402) 471-2814  
TRS USER 800 833-7352 (TTY)  
web address: <http://www.nol.org/home/NLCC/>

A4-085111  
82

*Lateau Enterprises, LLC dba The Green  
Lateau Cafe + Patisserie  
330 40 10  
Class J*

FILED  
CITY CLERKS OFFICE  
2004 JUL 30 P 3:35  
CITY OF LINCOLN  
NEBRASKA

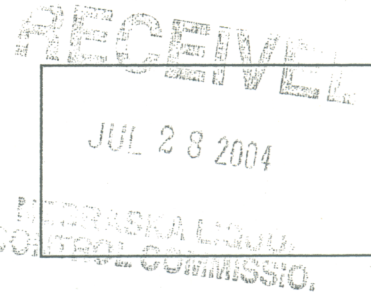
**APPLICATION FOR LICENSE**

Nebraska Liquor Control Commission  
PO Box 95046,  
301 Centennial Mall South  
Lincoln, NE 68509-5046

*Local New*  
*mp* *J#65113*  
<http://www.nol.org/home/NLCC/>

Phone: (402) 471-2971

Fax: (402) 471-2814



**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk ( \* )

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH**

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

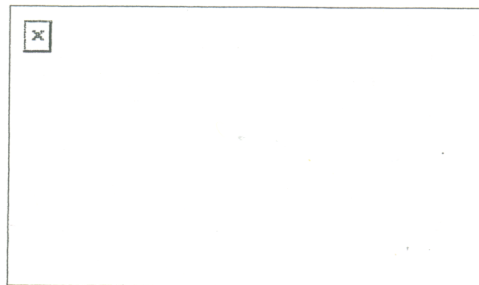
TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION	
Type of application being applied for (check appropriate box)		
1. <input type="radio"/> Individual License requires Form 1 to be attached.	Name	
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Firm Name	Address
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached		

### SECTION A -- LOCATION INFORMATION -- Must be completed by all applicants

Trade Name (name of business) The Green Gateau Cafe & Patisserie		Telephone Number at premise to be licensed 402/477-0330	
1) Street Address of Proposed licensed premise 330 S. 10th Street		2) Mailing Address for receipt of Liquor Control Commission mailings 330 S. 10th Street	
City Lincoln	County Lancaster	City Lincoln	County Lancaster
Zip Code 68408	Is this located inside the city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No	Zip Code 68508	

### DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

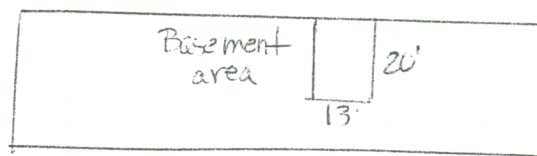
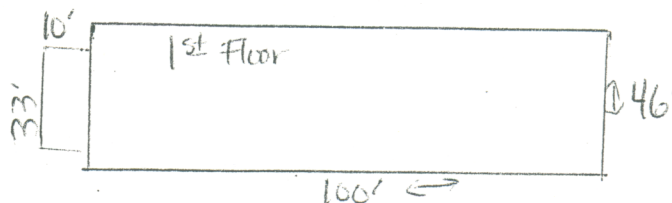
In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

2 story building:

N ↑



1st story: cafe 100' x 46'  
~~sidewalk cafe~~ 33' x 10'

2nd story area not licensed.



## SECTION B

OTHER INFORMATION  
REQUIRED \*

	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
<p>* 1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	



<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Pinnacle Bank (downtown branch) 1401 "N" St. Lincoln, NE 68508</p> <p>Eric A. Lemke Kelli R. Kerns</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p><i>None</i></p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Eric A. Lemke 40 hr./wk.</p>		

<p>13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.</p>	<p>none</p>		
<p>14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)</p>			
<p>15. When do you intend to open for business?</p>	<p>We are currently operating but hope to obtain a liquor license by Sept. 2004</p>		
<p>16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.</p>			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Kelli R. Kerns	1994	1996	Lincoln, NE
Kelli R. Kerns	1996	2004	Roca, NE
Eric A. Lemke	1994	2004	Lincoln, NE
Stuart Kerns	1994	1996	Lincoln, NE
Stuart Kerns	1996	2004	Roca, NE
Cristi Lemke	1994	2004	Lincoln, NE

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign here E. G. Zacc

Sign Here Kelli Kerns

Sign Here Leanne Kerns

Sign Here Cristi Lemke

Sign Here

Sign Here

Sign Here

Sign Here

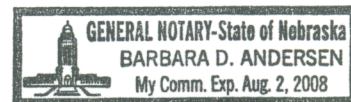
RECEIVED

JUL 28 2004

NEBRASKA LIQUOR  
CONTROL COMMISSION

Subscribed in my presence and sworn to before me this 26<sup>th</sup> day of July, 2004

(SEAL)



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign here

Barbara D. Andersen  
Notary Public Signature

Verify & Print form

FORM 35-4010

1

REV 1/01



# Corporation/LLC Application for License - Form 32 8 2004

## Nebraska Liquor Control Commission

**INSTRUCTIONS:**

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: **a)** each stockholder owning over 25% of the stock, **b)** chief executive officer, **c)** proposed manager and **d)** all spouses
- 3) Information regarding spouses must be completed

Required areas marked by a red asterisk ( \* )

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Gateau Enterprises, LLC \*

Total Number of Shares (if corporation)

100% \*

Corporate Street Address

330 S. 10th St. \*

Mailing address for receipt of Liquor Control Commission Mailings

330 S. 10th St. \*

Corporate Telephone Number

402 477-0330 \*

City

Lincoln \*

County

Lancaster \*

State

Ne \*

Zip Code

68508 \* -

Name of Registered Agent

Kelli Kerns \*

Name of Proposed Manager

Eric A. Lemke \*

**IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER**

Name

Eric A. Lemke

Title

\* Member \*

Date of Birth

\*

Social Security Number

Home Address (1)

710 N. 73rd. St. \*

City

Lincoln \*

State

NE \*

Zip Code

68505 \* -

Home Telephone Number

402-488-6381

**PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES**Name of Officers, Directors, Members and Spouses.  
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Lemke, Eric Allan

Member

Spouse Name

Lemke, Cristi Ann, Nelson

Partner Number of Shares / % 25%

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses.



<b>Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name Kerns, Kelli Ranae, Livengood	25767	0883	Member
Spouse Name Kerns, Stuart Lee	08-96-2240	05-1-62	
Partner Number of Shares / % 75%	Spouse Number of Shares / % 0		

<b>Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

<b>Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

<b>Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

(If Necessary, Continue on Separate Sheet)

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JUL 23 2004

Is this Corporation/LLC controlled by another Corporation?

Yes ☐ No ☒

Name of control Corporation

NEBRASKA LIQUOR  
CONTROL COMMISSION

If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC.  
Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

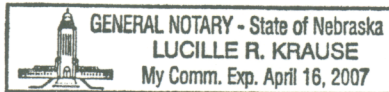
Please indicate below your corporate tax year with the IRS

Starting date: 7-1-04 Ending date: 12-31-04State of Nebraska

)

) ss.

)

Lincoln County

Lucille R. Krause 7/22/04  
Notary Public Signature & Seal

By

Kelli Kern  
President/Member

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Se. 2  
Secretary/Member

Verify Form and Print

FORM 35-4183  
REV. 02/01

# Application for Corporate Manager

**\*Must Be A Nebraska Resident\***

**Please submit in Triplicate**

JUL 28 2004

Return to: Nebraska Liquor Control Commission, PO Box 95046  
301 Centennial Mall So., Lincoln NE 68509

NEBRASKA LIQ  
CONTROL COMMISSION

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk ( \* )

## LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Gateau Enterprises , LLC \*

Class & License number

J \*

Trade Name of Licensed Premise

The Green Gateau Cafe & Patisserie \*

Street Address of Licensed Premise

330 S. 10th Street \*

City

Lincoln \*

County

Lancaster \*

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:

*E. C. Lemke*  
*Eric Lemke*

## APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Lemke, Eric Allan \*

Sex \*

F

M

☐

☒

Social Security Number

402-7513 \*

Date of Birth

2-13-87 \*

Place of Birth

St. Cloud, MN \*

Home Street Address

710 N. 73rd Street \*

City

Lincoln \*

County

Lancaster \*

State

NE \*

Zip Code

68505 \*

Home Telephone Number

402/488-6381 \*

Business Telephone Number

402/477-0330 \*

Drivers License Number

NE-0005522 \*

State

NE \*

Are You Married? \* Yes ☒ No ☐ If Yes, You must complete the following:

**SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)**

Full Name (Last, First, Middle, Maiden)

Lemke, Cristi Ann, Nelson

Social Security Number

RECEIVED

Drivers License Number	State
	NE

Date of Birth JUL 23 2004

NEBRASKA LIQUOR CONTROL COMMISSION

Place of Birth

Lincoln, NE

\* 1. **READ CAREFULLY.** Answer completely and accurately.  
Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No  
☐ ☒

\* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No  
☐ ☒

\* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No  
☐ ☒

\* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?  
Nebraska Liquor Control Act (§53-131.01)

Yes No  
☒ ☐

\* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No  
☒ ☐



**RESIDENCES SINCE AGE 18. APPLICANT AND SPOUSE MUST COMPLETE**Year  
From To

Applicant: City &amp; State

Lincoln, NE

93 04

Spouse: City &amp; State

Lincoln, NE

93 04

Year  
From To

Applicant: City &amp; State

Tucson, AZ

91 93

Spouse: City &amp; State

Tucson, AZ

91 93

Year  
From To

Applicant: City &amp; State

Spouse: City &amp; State

Year  
From To

Applicant: City &amp; State

Spouse: City &amp; State

**EMPLOYERS - LIST LAST TWO EMPLOYERS**

Year

Name of Employer

From To

The Green Gateau Cafe

1999 2004

Name of Supervisor

Telephone Number

Bill Livengood

402/435-3567

Year

Name of Employer

From To

The Cornhusker Hotel

1998 1999

Name of Supervisor

Telephone Number

Reese Hummel

402/474-7474

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY**

RECEIVED

APPLICANT & SPOUSE

JUL 22 2004

STATE OF NEBRASKA )

) SS

COUNTY OF )

NEBRASKA LIQUOR  
CONTROL COMMISSION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

*C. Zure*

Signature of Applicant

*Cristi Lemke*

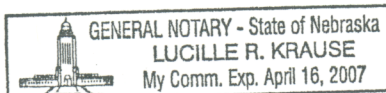
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this  
22 day of July 2004

Subscribed in my presence and sworn to before me this  
23 day of July 2004

*Lucille R. Krause*

Notary Signature & Seal



*Barbara Andersen*

Notary Signature & Seal

Verify and Print

FORM 35-4013  
REV. 2/01

RECEIVED

JUL 28 2004

NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION

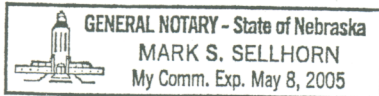
The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

[Signature]

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 23 day of

JULY, 2004.



[Signature]

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]

Signature of Licensee/Applicant

Kelli R. Kerns

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 26th day of

July, 2004.



[Signature]

Signature of Notary Public

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REV 2/01

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NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR  
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

Cristi Lemke

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 19<sup>th</sup> day of

July, 2004.



Ruta Dinsmore

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

E. C. Zuer

Signature of Licensee/Applicant

Eric Lemke

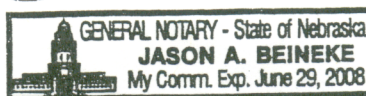
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 20 day of

July, 2004.

Jason A. Beineke

Signature of Notary Public



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